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UNITED STATES SECURITIES AND EXCHANGE GOMMISSION Washington, D.C. 20549 FORM D

MD LPR - 1 L

NOTICE OF SACE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

OMB A	PPROVAL				
OMB Number:	3235-0076				
Expires:	May 31, 2002				
Estimated average hours per respo	e burden nse1				
SEC U	JSE ONLY				
Prefix	Serial				
İ					
DATE	RECEIVED				
}	1				

Name of Offering (check if this is Series A Preferred Stock Financia	an amendment and name has changed, and i	indicate change.)		71236
Filing Under (Check box(es) that appl	y): Rule 504 Rule 505	Rule 506 [Section 4(6)	ULOE
Type of Filing: New Filing	Amendment			
	A. BASIC IDENTIFICA	TION DATA		
1. Enter the information requested ab Name of Issuer check if this is an	out the issuer amendment and name has changed, and indi	cate change.)		
Energy Virtual Partners, Inc.				
Address of Executive Offices (Num	nber and Street, City, State, Zip Code)		Telephone Numbe	er (Including Area Code)
17 River Hollow Lane Houston, T	exas 77027-9401		(713) 963-0972	
Address of Principal Business Oper different from Executive Offices)	rations (Number and Street, City, State, Zip	Code) (if	Telephone Numbe	er (Including Area Code)
Brief Description of Business providing oil and gas property man	agement services			PROCESSED
Type of Business Organization				_ APR 1 8 2002
	☐ limited partnership, already formed			P
business trust	☐ limited partnership, to be formed	other	(please specify):	THOMSON
Actual or Estimated Date of Incorpora Jurisdiction of Incorporation or Organ		1 🗵 🗵 rvice Abbreviation	for State:	stimated

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File. U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed

must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and

the Appendix need not be filed with the SEC. *Filing Fee*: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 Potential persons who are to respond to the collection of information contained in this form (6/99) are not required to respond unless the form displays a currently valid OMB control number.

		A. BASIC IDENTI	FICATION DATA		
 Each beneficial own Each executive office 	ne issuer, if the issuer liner having the power to	nas been organized within the provided of the volume of th	vote or disposition of, 10% or		
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	■ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, Peebler, Robert	if individual)				
Business or Residence Add	ress (Number and S	treet, City, State, Zip Code)			
17 River Hollow Houston,	,	, 3 , , 1			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, Work, David	if individual)				
Business or Residence Add	ress (Number and S	treet, City, State, Zip Code)	10 10 10 10 10 10 10 10 10 10 10 10 10 1		
17 River Hollow Houston,	•				
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	⊠ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, Walls, Michael	if individual)				
Business or Residence Add 17 River Hollow Houston,	`	treet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, Mooney, William	if individual)	_		-	
Business or Residence Add	ress (Number and S	treet, City, State, Zip Code)			
Attn: Michael Baker Cor	-				
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, Cauthen, Gregory	if individual)				
Business or Residence Adda Attn: Cliffs Drilling Com	•				
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	Executive Officer	Director	General and/or
		Es Beneficial Owner			Managing Partner
Full Name (Last name first, Michael Baker Corporation)	•				
Business or Residence Add		treet City State Zin Code)			
P.O. Box 12259 Pittsburg,	•	area, early, etate, zip code,			
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Cliffs Drilling Company					
Business or Residence Add	ress (Number and S	treet, City, State, Zip Code)			
P.O. Box 2765 Houston, T	exas 77252-2765				
	(Use blan	nk sheet, or copy and use add	ditional copies of this sheet	, as necessary)	

		A. BASIC IDENTI	FICATION DATA	8-1-2-1-2 - 7-2-1-2-1-2-1-2-1-2-1-2-1-2-1-2-1-2-1-2-							
Each promoter of thEach beneficial ownEach executive office	 Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and 										
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner						
Full Name (Last name first, McKenna, Darrell	if individual)				The same of the sa						
Business or Residence Add	ress (Number and S	treet, City, State, Zip Code)									
17 River Hollow Houston,	Texas 77027										
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner						
Full Name (Last name first, Lewis, David	if individual)										
Business or Residence Addi	ress (Number and S	treet, City, State, Zip Code)									
17 River Hollow Houston,	Texas 77027										
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner						
Full Name (Last name first, Simpson, Marcia	if individual)				:						
Business or Residence Addr 17 River Hollow Houston,		treet, City, State, Zip Code)									
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first,	if individual)										
Dale, Christopher											
Business or Residence Adda		treet, City, State, Zip Code)									
17 River Hollow Houston,											
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first,	if individual)										
Business or Residence Addi	ress (Number and S	treet, City, State, Zip Code)									
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner						
Full Name (Last name first,	if individual)										
Business or Residence Addr	ress (Number and S	treet, City, State, Zip Code)			.,						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first,	if individual)										
Business or Residence Addr	ress (Number and S	treet, City, State, Zip Code)									
	(I lse blar	ok sheet, or copy and use add	ditional conies of this sheet	as necessary)							

	•			В. І	NFORMAT	TION ABO	UT OFFE	RING		· · · · · · · · · · · · · · · · · · ·		
1 11 1	. ,	1 1 .1		1 , 11		- 414 - 11		.c u			Yes	No
1. Has th	ie issuer solo	i, or does th	e issuer inte		to non-accr ver also in A			_		•••••	Ш	X
2. What	is the minim	um investm	ent that wil	ll be accept	ed from any	y individual	?			•••••	\$	n/a
3. Does t	3. Does the offering permit joint ownership of a single unit?										Yes	No ⊠
	the informa		-	•								<u> </u>
comm	ission or sing. If a pers	milar remu	neration fo	r solicitati	on of purc	hasers in c	onnection	with sales	of securiti	es in the		
with a	state or sta	tes, list the	name of the	e broker or	dealer. If	more than	five (5) per	rsons to be	listed are a			
	(Last name			ay set forti	ttie inform	ation for th	at broker of	dealer only	y.			
Business or	Residence .	Address (N	umber and S	Street, City	, State, Zip	Code)						
Name of A	ssociated Br	oker or Dea	ler								· · · · · · · · · · · · · · · · · · ·	
States in W	hich Person	Listed Has	Solicited o	r Intends to	Solicit Pur	chasers						
(Check '	'All States"	or check inc	lividuals St	ates)		•••••	• • • • • • • • • • • • • • • • • • • •				🔲 .	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI] —	[WY]	[PR]
Full Name	(Last name	first, if indiv	vidual)									
Business or	Residence	Address (N	umber and S	Street, City	, State, Zip	Code)						
Name of A	ssociated Br	oker or Dea	ler									
States in W	hich Person	Listed Has	Solicited or	r Intends to	Solicit Pur	chasers						
(Check '	'All States"	or check inc	lividuals St	ates)		•••••				······································	_	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	(IN)	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[MM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
	(Last name			[17]	[01]	[' ']	[۲۸]	[WA]	["']	[""]	[' ' ']	[, , ,]
	Residence			Straat City	State 7in	Codo						
	ssociated Br			Sireei, City	, State, Zip				A			
	hich Person			r Intondo to	Caliait Dur				-	<u> </u>		
	'All States"										🗖 .	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	(HI]	[ID]
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
			(Use bla	nk sheet, o	r copy and	use addition	nal copies o	t this sheet,	as necessa	ry)		

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PRO	CEEEE		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	.		
	Type of Security	Aggregate Offering Price	An	nount Aiready Sold
	Debt	\$	\$	Solu
	Equity	\$	\$	-
	☐ Common ☒ Preferred	\$ 4,175,000.00		3,459,209.00
	Convertible Securities (including warrants)	\$	\$	3,137,207.00
	Partnership Interests.	\$	\$ \$	
	Other (Specify)	\$	\$	
	Total	\$ 4,175,000.00		2 450 200 00
	Answer also in Appendix, Column 3, if filing under ULOE.	\$ 4,173,000.00	<u> </u>	3,459,209.00
_				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines Enter "0" if answer is "none" or "zero."			
		Number Investors	D	Aggregate ollar Amount of Purchase
	Accredited Investors	15	<u>\$</u>	3,459,209.00
	Non-accredited Investors		\$	
	Total (for filings under Rule 504 only)	N/A	<u>\$</u>	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			
	securities in this orienting. Classify securities by type listed in ran C - Question r.		D.	ollar Amount
	Type of Offering	Type of Security	D	ollar Amount Sold
		Type of	D-	
	Type of Offering	Type of Security		Sold
	Type of Offering Rule 505	Type of Security N/A	\$	Sold N/A
	Type of Offering Rule 505 Regulation A	Type of Security N/A N/A	<u>\$</u>	Sold N/A N/A
4.	Type of Offering Rule 505 Regulation A Rule 504	Type of Security N/A N/A N/A N/A	\$ \$ \$	Sold N/A N/A N/A
4.	Type of Offering Rule 505	Type of Security N/A N/A N/A N/A	\$ \$ \$	Sold N/A N/A N/A
4.	Type of Offering Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	Type of Security N/A N/A N/A N/A	\$ \$ \$	Sold N/A N/A N/A
4.	Type of Offering Rule 505	Type of Security N/A N/A N/A N/A	\$ \$ \$ \$	Sold N/A N/A N/A
4.	Type of Offering Rule 505	Type of Security N/A N/A N/A N/A N/A	\$ \$ \$ \$	Sold N/A N/A N/A N/A
4.	Type of Offering Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees	Type of Security N/A N/A N/A N/A N/A	\$ \$ \$ \$ \$	Sold N/A N/A N/A N/A
4.	Type of Offering Rule 505	Type of Security N/A N/A N/A N/A N/A	\$ \$ \$ \$ \$ \$ \$	Sold N/A N/A N/A N/A
4.	Type of Offering Rule 505	Type of Security N/A N/A N/A N/A N/A	\$ \$ \$ \$ \$ \$ \$	Sold N/A N/A N/A N/A

	C. OFFERING PRI	CE, NUMBER OF INVESTORS, EXPENSES AND USE OF PR	OCEE	DS			5 J. J.
	total expenses furnished in response to Par	e offering price given in response to Part C - Question I and t C - Question 4.a. This difference is the "adjusted gross	S		\$	3.	409,209.00
5.	of the purposes shown. If the amount for any	iss proceeds to the issuer used or proposed to be used for each purpose is not known, furnish an estimate and check the bolayments listed must equal the adjusted gross proceeds to the 1.5 above.	X				
			Office	ayments to rs, Directors & Affiliates			nents to thers
	Salaries and fees		□ \$	50		\$	-0-
	Purchase of real estate		□ \$	30-		\$	-0-
	Purchase, rental or leasing and installation of	machinery and equipment	□ \$	50		\$	-0-
	Construction or leasing of plant buildings and	facilities		S0-		\$	-0-
		value of securities involved in this offering that may be used	_	_	_	_	
	<u> </u>	her issuer pursuant to a merger.)				\$	-0-
	• •			<u>-0-</u>		-	-0-
	.		□ \$	<u>-0-</u>	\times	<u>3.</u>	409,209.00
			□ \$	<u>-0-</u>		\$	
	Column Totals		□ \$	<u>-0-</u>	X	\$ 3	3,409,209.00
	Total Payments Listed (column totals add	led)		⊠ \$ <u>3.4</u>	09,2	09.0	<u>0</u>
		D. FEDERAL SIGNATURE					
sig	gnature constitutes an undertaking by the issue	ed by the undersigned duly authorized person. If this notice or to furnish the U.S. Securities and Exchange Commission credited investor pursuant to paragraph (b)(2) of Rule 502.	is file , upon	d under Rule : written reque	505, st o	the : f its	following staff, the
Is	suer (Print or Type)	Signature		Date			
E	nergy Virtual Partners, Inc.	(Long Public		March 20.	200	2	
N	ame of Signer (Print or Type)	Title or Signer (Print or Type)					
R	obert Peebler	Chief Executive Officer and President					
		ATTENTION					
	Intentional misstatements or	omissions of fact constitute federal criminal violations. (See	18. U	.S.C. 1001.)			

APPENDIX

1		2	3		4					
	Intend non-acc inves	to sell to credited tors in ate -Item 1)	Type of security and aggregate offering price offered in state (Part C -Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
				Number of Accredited		Number of Non-Accredited				
State AL	Yes	No		Investors	Amount	Investors	Amount	Yes	No	
AK						+		1		
AZ									 	
AR										
CA					-		 			
CO		X	Series A Preferred Stock	1	\$60,000		<u> </u>		X	
CT										
DE						+				
DC						 				
FL										
GA										
HI										
ID										
IL				<u> </u>						
IN										
IA										
KS										
KY										
LA		X	Series A Preferred Stock	1	\$12,864.50				X	
ME										
MD										
MA		X	Series A Preferred Stock	1	\$150,000				X	
MI										
MN										
MS										
МО										
MT										
NE		,,	G . A P . G . I G .		#/A 000				v	
NV		X	Series A Preferred Stock	1	\$60,000			<u></u>	X	

APPENDIX

1		2	3		5				
	non-accinves	to sell to credited tors in ate -Item 1)	Type of security and aggregate offering price offered in state (Part C -Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No	Convertible Securities	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
NH				•					
NJ									
NM'									
NY									
NC									
ND									
ОН									
OK									
OR									
PA		X	Series A Preferred Stock	1	\$1,000,000				X
RI									
SC									
SD									
TN									
TX		X	Series A Preferred Stock	10	\$2,176,344.50				X
UT									
VT									
VA									
WA									
WV									
WI									
WY									
PR									
				<u> </u>					
				 					
				··· · · · · · · · · · · · · · · · · ·					